clinical trials of herbal drugs for Diabetss Mellitius, urolithiasis and filariasis. Central Drugs Research Institute, Lucknow has also undertaken development of herbal drugs for wound healing, anti-stress and hepto-protective.

(c) and (d) Government has set up Central Council of Indian Medicine and Central Council of Homoeopathy to ensure observance of the minimum standards of education in the country including infrastructure. The standards of education lack uniformity at places. Central Government is assisting under-graduate and post-graduate teaching institutions to improve their infrastructure and raise the standards of teaching and training.

Incentives for Adopting Small Family Norms

1371. PROF. M.M. AGARWAL: Will the MINISTER OF HEALTH AND FAMILY WELFARE be pleased to state the details of incentives being provided by Government to the people to encourage small family norms keeping in view of the increasing population of the country?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. C. P. THAKUR): The National Population Policy, 2000 envisages some promotional/ notivational measures for adoption of small family norm is given in the Statement enclosed.

Statement

Small Family Norms

(1) Panchayats and Zila Parishads will be rewarded and honoured for exemplary performance in universalising the small family norms, achieving reductions in infant mortality and birth rates and promoting literacy with completion of primary schooling.

(2) The Balika Samridhi Yojana run by the Departmet of Womenand Child Development, tc promote survival and care of the girl child, will continue. A cash inventive of Rs. 500 is awarded at the birth of the girl child of birth order 1 or 2.

(3) Maternity Benefit Scheme run by the Department of Rural Development will continue. A cash incentive of Rs. 500 is awarded to mothers who have their first child after 19 years of age, for birth of the first or second child only. Disbursement of the cash award will in future be linked to compliance with antenatal check up, institutional delivery by trained birth attendant, registration of birth and BCG immunisation.

(4) A family Welfare-linked Health Insurance Plan will be established. Couples below the poverty line, who undergo sterilisation with not more than two living children, would become eligible (along with children) for health insurance (for hospitalisation) not exceeding Rs. 5000/- and a personal accident insurance cover for the spouse undergoing sterilisation.

(5) Couples below the poverty line, who marry after the legal age of marriage, register the marriage, have their first child after the mother reaches the age of 21, accept the small family norm, and adopt a terminal method after birth of the second child, will be rewarded.

(6) A revolving fund will be set up for income-generating activities by village-level self help groups, who provide community-level health care services.

(7) Creches and childcare centres will be opened in rural areas and urban slums. This will facilitate and promote participation of women in paid employment.

(8) A wider, affordable choice of contraceptives will be made accessible at diverse delivery points, with counselling services to enable acceptors to exercise voluntary and informed consent.

(9) Facilities for safe abortion will be strengthened and expanded.

(10) Products and services will be made affordable through innovative social marketing schemes.

(11) Local entrepreneurs at village levels will be provided soft loans and encouraged to run ambulance services to supplement the existing arrangements for referral transportation.

(12) Increased vocational training schemes for girls, leading to self-employment will be encouraged.

(13) Strict enforcement of Child Marriage Restraint Act, 1976.

(14) Strict enforcement of the Pre-Natal Diagnostic Techniques Act, 1994.

(15) Soft loans to ensure mobility of the ANMs will be increased.

Blind persons in the Country

1372. SHRI CHO S. RAMASWAMY: Will the MINISTER OF HEALTH AND FAMILY WELFARE be pleased to state:

(a) the total number of blind persons in the country, State-wise;